

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M - G		11/5/00
O.L.P.E. CLASSIFER		59	11/30/00
FORMALITY REVIEW		72617	2/2/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted 0 Objected

Claim	Final	Original	Date
1	✓	✓	10/03/00
2	✓	✓	10/16/00
3	✓	✓	10/16/00
4	✓	✓	10/16/00
5	✓	✓	10/16/00
6	✓	✓	10/16/00
7	✓	✓	10/16/00
8	✓	✓	10/16/00
9	✓	✓	10/16/00
10	✓	✓	10/16/00
11	✓	✓	10/16/00
12	✓	✓	10/16/00
13	✓	✓	10/16/00
14	✓	✓	10/16/00
15	✓	✓	10/16/00
16	✓	✓	10/16/00
17	✓	✓	10/16/00
18	✓	✓	10/16/00
19	✓	✓	10/16/00
20	✓	✓	10/16/00
21	✓	✓	10/16/00
22	✓	✓	10/16/00
23	✓	✓	10/16/00
24	✓	✓	10/16/00
25	✓		
30	✓		
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If more than 150 claims or 10 actions
staple additional sheet here

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